

TOWN OF HERNDON



Department of Community Development, P. O. Box 427, Herndon, Virginia 20172-0427

ADMINISTRATIVE SIGN APPROVAL SIGN PERMIT UNDER A MASTER SIGN PLAN

The undersigned hereby applies for a Sign Permit Under a Master Sign Plan under the provisions of § 78-202.7 of the Herndon Town Code. The undersigned certifies that all information in this application is true and correct and that the requirements of this application have been read and are understood.

Submittal of this form with original signatures is **required**.

PLEASE PRINT OR TYPE (Unless otherwise indicated.)

Subject Property Information

Address of Subject Property:

Name of Business Establishment Associated
with this Application:

Building/Development Name:

Type of Use (please specify whether
commercial, industrial, office, or other):

Tenant or Establishment Frontage:

Sign Message Content:

Length and Width of Sign (Square footage not to
exceed ratio of one square foot per linear foot of frontage.):

Construction Materials of Sign:

Property Owner Information

Name and Title:

Company Name:

Mailing Address:

Telephone Number(s):

Fax Number:

E-mail Address:

Signature of Property Owner: (Original Signature
Required - No faxes or stamps):

Applicant Information

Name and Title: _____

Company Name: _____

Mailing Address: _____

Telephone Number(s): _____

Fax Number: _____

E-mail Address: _____

Applicant Signature: (Original Signature Required -
No faxes or stamps): _____

ADMINISTRATIVE SIGN APPROVAL - SIGN PERMIT UNDER A MASTER SIGN PLAN - continued

APPLICATION REQUIREMENTS

Item

1 One (1) completed application form with all required signatures.

2 One (1) scaled drawing of the proposed sign. The drawing must indicate the following items: (a) all message content to include text, logos and graphics, (b) accurate colors, (c) construction details of sign, (d) dimensions, (e) type of illumination and (f) location of the sign placement. See User's Guide to the Herndon Zoning Ordinance #3. Signs for a description of the method used for calculating sign area.

For Office Use Only:

Application Received by:	Date:
Fee Paid:	Case No:
Public Hearing Date:	Zoning District:
Tax Map Reference Number:	
Status of Taxes: <input type="checkbox"/> Paid <input type="checkbox"/> Delinquent	
Action:	Date:
Signature of Zoning Administrator:	
Notes: _____	
